CERTIFICATE OF INSURANCE

ISSUE DATE (MM/DD/YY)

PRODUCER

Meeker Sharkey & MacBean 21 Commerce Drive Cranford, NJ 07018

908-272-8100

INSURED Soc. Hill @ University Hts.III c/o Eastern Community Mgmt 225 Highway 35

Red Bank

NJ

07701

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

COMPANIES AFFORDING COVERAGE

COMPANY A St. Paul Fire & Marine LETTER

COMPANY B LETTER

COMPANY C LETTER

COMPANY LETTER

LETTER

COVERAGES

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED, NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

CO	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A GENERAL LIABILITY	ENERAL LIABILITY	8002900238	1/01/34 1/01/95	OFMEDAL ACCRECATE
	COMMERCIAL GENERAL UABILITY	8002300230	1701734 1701730	PRODUCTS-COMP/OP AGG. \$ 300000
	CLAIMS MADE OCCUR.	•		PERSONAL & ADV. INJURY \$ 30000
	OWNER'S & CONTRACTOR'S PROT			EACH OCCURRENCE \$ 5000
		•	•	FIRE DAMAGE (Any one fire) \$ 5004
	(p_1,p_2,p_3) , and (p_2,p_3) , which is the second of the second o			MED. EXPENSE (Any one person) \$
: A	UTOMOBILE LIABILITY			COMBINED SINGLE \$
	ANY AUTO		•	Annual water water and the second sec
	ALL OWNED AUTOS	•	•	BODILY INJURY (Per person)
. :.	SCHEDULED AUTOS		4.4	The second secon
: :	HIRED AUTOS		•	BOD!LY INJURY (Per accident)
	NON-OWNED AUTOS	•		Control of the Contro
:	GARAGE LIABILITY			PROPERTY DAMAGE \$
EX	XCESS LIABILITY			EACH OCCURRENCE \$
	UMBRELLA FORM			AGGREGATE \$
	OTHER THAN UMBRELLA FORM			The state of the s
	OTHER THAN OWNER CERT COMM			STATUTORY LIMITS
	WORKER'S COMPENSATION	**************************************		EACH ACCIDENT \$
	_ AND			DISEASE—POLICY LIMIT \$
	EMPLOYERS' LIABILITY		, ,	DISEASE-EACH EMPLOYEE \$
1	PHER t Bldg.& Ents		1/01/94 - 1/01/9	
A	Fidelity	BC02900238	1/01/94 1/01/9	5 \$100,000.

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

GAETANA MARSHALL, UNMARRIED LOCs

90 CALLAHAN COURT, NEWARK, NJ 07103 (22A1) LOT: 21.01 BLOCK: 406

KH0V035228

CERTIFICATE HOLDER

K. HOVNANIAN MORTGAGE, INC., THEIR SUCCESSORS AND/OR ASSIGNS, AS THEIR INTEREST MAY APPEAR ONE INDUSTRIAL WAY WEST, BLDG. D EATONTOWN, NJ 07724

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL _____ DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

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